Change in Company's premium or rate level produced by rate revision effective $\underbrace{07/01/2011}$.

4	(0)	(2)
(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	\$9,818	-0.7%
10. Extended Coverage	\$7,010	-0.770
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other	*****	
Line of Insurance		
Does filing only apply to certain If so, specify: N/A	territory (territories)	r certain classes?
Brief description of filing. (If organization	n): American Alternative (AAIC) proposes a si product previously k Property Core Product approval. We propose	Insurance Corporation gnificant update to our
* Adjusted to reflect all prior: ** Change in Company's premium ler result from application of new	vel which will	
Ž.	merican Alternative Insur	ance Corporation
	Name of Compa	
	Style J. Clitt	Vice President
	Official - Ti	tle

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate le	vel produced by rate revision effective	3/1/2011
(1) Coverage	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
 Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft 		
5. Glass6. Fidelity7. Surety8. Boiler and Machinery9. Fire	6,180	9.3%
10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance		
Does filing only apply to certain territory (MH.MP.1 & MH.MP.2 These pages are added. The territory de MH.RP.1 & 2-All Purpose Program 1.MANUFACTURED HOME COVERAGE 2.UNATTACHED OTHER STRUCTURES 3.PERSONAL PROPERTY COVERAGE 4.OWNERS', LANDLORDS' & TENANTS 5.MEDICAL PAYMENTS TO OTHERS \$500 is now included if liability coverage 6.BUILDERS RISK COVERAGE: This is 7.INCREASED RADIO & TELEVISION A 8.INCREASED FIRE DEPARTMENT SE 9.EARTHQUAKE COVERAGE: This cov 10.FLOOD COVERAGE: The rate has b	E: The rates have changed S COVERAGE: The rates have changed : The rates have changed : The rates have changed S' LIABILITY COVERAGE: The rates have COVERAGE: The \$500, \$1,000, \$2,50 is purchased. a new optional coverage. NTENNA COVERAGE: This is a new optional verage is no longer included in the base peen changed.	ve changed. 00 and \$5,000 limits have been added. otional coverage. coverage. eackage and is now optional.
LENDERS INTEREST PROTECTION: T NATURAL DISASTER PROTECTION: T 30 DAY TRIP COLLISION COVERAGE:	his optional coverage has been removed	<u>l.</u>
CREDITS/SURCHARGES	and an although an all a selections.	
1.DEDUCTIBLE OPTIONS: The options 2.CLAIM FREE TRANSFER CREDIT: T 3.SUPPLEMENTAL HEATING SURCHA 4.CLAIMS SURCHARGE: This surcharg 5.SCHEDULED MANUFACTURED HOM	his credit has been added. RGE: This surcharge is now percentage te has been added.	
Brief description of filing. (If filing follows We are proposing revisions to our curr+9.3%. The changes to this filing have be	rates of an advisory organization, specify ently approved Illinois Manufactured Hoeen provided to you in the NAIC transmitt	ome Program. The overll rate impact is

^{*}Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

F 540 UNIFORM INFORMATION SERVICES, INC.

American Reliable Insurance Company	_
Name of Company	
Valley Owens - Vice President	
Official – Title	
•	

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C	hange in Company's premium or rate	level produced by rate revision effective	1/1/2011
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	190,712	-10.4%
l0.	Extended Coverage	245,293	5.7%
11.	Inland Marine		
12.	Homeowners		
l 3 .	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
oos fi	ling only apply to certain territory (te	rritories) or certain classes? If so, specify:	
No	ing only apply to certain territory (to	intolics) of certain classes: If so, specify.	
rief d	escription of filing. (If filing follows	rates of an advisory organization, specify of	organization):
Adop	t ISO loss costs found in reference #:	CF-2009-239 and introducing EMCASCO	Insurance Company and
	Property & Casualty Compay		

* Adjusted to reflect all prior rate changes.

Employers Mutual Casualty Company
Name of Company

Don Coughennower
Assistant Vice President
Official - Title

^{**} Change in Company's premium level which will result from application of new rates.

•	Change in Company's premium or rai	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	1,134,809	-9.2%
10.	Extended Coverage	1,221,244	6.8%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	iling only apply to certain territory (t	erritories) or certain classes? If so, specify:	
Adop	description of filing. (If filing follow of ISO loss costs found in reference #E Property & Casualty Company	s rates of an advisory organization, specify of the control of the	organization): CO Insurance Company and

* Adjusted to reflect all prior rate changes.

Illinois EMCASCO Insurance Company
Name of Company

Don Coughennower
Assistant Vice President
Official - Title

^{**} Change in Company's premium level which will result from application of new rates.

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

(1)	(2) Annual Premium	(3) Percent
Coverage	 Volume (Illinois) * 	Change (+or-) **
Automobile Liability Private		
Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger		
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery	<u></u>	
Fire	903,078	6.8%
Extended Coverage	176,939	0.0%
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other		
Life of Insurance		
Does filing only apply to cert Classes? If so, specify:	ain territory (territories) c	or certain
Brief description of filing. (If	filing follows rates of an	advisory
Organization, specify		
organization):		ogram base rates, loss const
and rating factors as described in	the Explanatory Memorandu	<u>m.</u>

Illinois FAIR Plan Association Name of Company Doug Jensen, President

Official - Title

^{**}Change in Company's premium level which will result from application of new rates.

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 9/1/2011 (3) (2) (1) **Percent Annual Premium** Volume (Illinois)* Change (+ or -)** Coverage 1. Automobile Liability Private Passenger Commercial Automobile Physical Damage 2. Private Passenger Commercial 3. Liability Other Than Auto Burglary and Theft 5. Glass 6. Fidelity 7. Surety **Boiler and Machinery** 8. 144,750 9. Fire 6.80% 10. Extended Coverage 242,645 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No, we are adopting Loss Costs for all Fire and Allied Lines territories. This applies to Riverport Insurance Company. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the ISO Fire and Allied Loss Cost revision CF-2009-RLC09 effective September 1, 2011. Our percentage of change number for fire is based on ISO's rate level change. The Extended Coverage percentage is based on no change for Group II (per ISO) and an average rate increase for Special coverage between buildings and contents based on our business we write. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Riverport Insurance Company

Name of Company

Gregory G. Gertz, Asst. Product Development Analyst

Official - Title

	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$38,443	25%
10.	Extended Coverage	\$15,425	25%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	description of filing. (If filing follow are implementing ISO revisions CF-2	es rates of an advisory organization, specif 009-RRU09 & CF-2009-RLC09.	y organization):
			y organization):
* A		009-RRU09 & CF-2009-RLC09.	y organization):
* A	djusted to reflect all prior rate change hange in Company's premium level v	009-RRU09 & CF-2009-RLC09.	y organization):
* A	djusted to reflect all prior rate change hange in Company's premium level v	009-RRU09 & CF-2009-RLC09. es. which will	
* A	djusted to reflect all prior rate change hange in Company's premium level v	009-RRU09 & CF-2009-RLC09. es. which will	lter General Insurance
* A	djusted to reflect all prior rate change hange in Company's premium level v	009-RRU09 & CF-2009-RLC09. es. which will	
* A	djusted to reflect all prior rate change hange in Company's premium level v	es. which will She	lter General Insurance npany Name of Company
* A	djusted to reflect all prior rate change hange in Company's premium level v	es. which will She	lter General Insurance npany Name of Company an Marcks, Coord Ins Dept

Official - Title

	See and the See See	ate level produced by rate revision effective	01/01/2011
	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability		
••	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery	*	
9.	Fire	\$27,622	25%
10.	Extended Coverage	\$11,666	25%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Line of Insurance		
rief		vs rates of an advisory organization, specify 2009-RRU09 & CF-2009-RLC09.	
* C	djusted to reflect all prior rate chang hange in Company's premium level sult from application of new rates.	es. which will	
* C	hange in Company's premium level	which will	er Mutual Insurance Company
* C	hange in Company's premium level	which will	er Mutual Insurance Company Name of Company

"Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE **SUMMARY SHEET**

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage Private Passenger Commercial		•
Liability Other Than Auto		
Burglany and Thaff		
Class		
Eidalitu		
Surety		
Boiler and Machinery		
Fire	\$365,144 (est.)	+5.0%
Extended Coverage	\$284,578 (est.)	+5.0%
Inland Marina		
1.1		
Cron Hail		
. Other		
Line of Insurance		
es filing only apply to certain territory (terri	tories) or certain classes? If so, specify	r. No.
int description of filing. (If filing follows rate	of an advisory arganization anality	ragnization): Dwalling Fire hope rate
ef description of filing. (If filing follows rates Coverages A and C, for all forms, have be		
Coverages A and O, for all forms, have be	on moreased by 10.070.	

Standard Mutual Insurance Company Name of Company behm, CPCU, Assistant Underwriting Manager Official - Title

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

^{**}Change in Company's premium level which will result from application of new rates.